

# ILLINOIS DEPARTMENT OF INSURANCE

## SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision e

4/15/2014 new &amp; renewal

| (1)<br>Coverage                 | (2)<br>Annual Premium<br>Volume (Illinois)* | (3)<br>Percent<br>Change (+ or -)** |
|---------------------------------|---|-------------------------------------|
| 1. Automobile Liability Private |   |                                     |
| Passenger Commercial            | 2,832,490                                   | 1.7%                                |
| 2. Automobile Physical Damage   |   |                                     |
| Private Passenger Commercial    | 1,076,644                                   | 6.8%                                |
| 3. Liability Other Than Auto    |   |                                     |
| 4. Burglary and Theft           |   |                                     |
| 5. Glass                        |   |                                     |
| 6. Fidelity                     |   |                                     |
| 7. Surety                       |   |                                     |
| 8. Boiler and Machinery         |   |                                     |
| 9. Fire                         |   |                                     |
| 10. Extended Coverage           |   |                                     |
| 11. Inland Marine               |   |                                     |
| 12. Homeowners                  |   |                                     |
| 13. Commercial Multi-Peril      |   |                                     |
| 14. Crop Hail                   |   |                                     |
| 15. Other                       |   |                                     |
| Line of Insurance               |   |                                     |

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

All Territories

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Revising LCMs

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new rates.

Allmerica Financial Benefit Insurance Company

Name of Company

Laura Lussier - Actuarial Asst.

Official - Title

## Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

## SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision  
effective 01/01/2014.

|     | (1)  | (2)                                   | (3)                         |
|-----|--|---------------------------------------|-----------------------------|
|     | Coverage                                       | Annual Premium<br>Volume (Illinois) * | Percent<br>Change (+or-) ** |
| 1.  | Automobile Liability Private<br>Passenger      |                                       |                             |
|     | Commercial                                     | \$3,891,171                           | 0                           |
| 2.  | Automobile Physical Damag<br>Private Passenger |                                       |                             |
|     | Commercial                                     | \$581,850                             | 0                           |
| 3.  | Liability Other Than Auto                      |                                       |                             |
| 4.  | Burglary and Theft                             |                                       |                             |
| 5.  | Glass  |                                       |                             |
| 6.  | Fidelity                                       |                                       |                             |
| 7.  | Surety   |                                       |                             |
| 8.  | Boiler and Machinery                           |                                       |                             |
| 9.  | Fire   |                                       |                             |
| 10. | Extended Coverage                              |                                       |                             |
| 11. | Inland Marine                                  |                                       |                             |
| 12. | Homeowners                                     |                                       |                             |
| 13. | Commercial Multi-Peril                         |                                       |                             |
| 14. | Crop Hail                                      |                                       |                             |
| 15. | Other  |                                       |                             |

Line of Insurance

Does filing only apply to certain territory (territories) or certain  
Classes? If so,  
specify: Taxi only

Brief description of filing. (If filing follows rates of an advisory  
Organization, specify  
organization):

Adoption of ISO circular LI-CA-2013-164,, revised UM/UIM LCM for Taxi

for Chicagoland territories, effective 01/01/2014

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new  
rates.

American Service Insurance

Name of Company

Magdalena Wiktorko- Product Development and Compliance Analyst

Official - Title

**Section 754.EXHIBIT A Summary Sheet (Form RF-3)**

FORM (RF-3)

**SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision  
effective 1/01/2014.

|     | (1)<br>Coverage                             | (2)<br>Annual Premium<br>Volume (Illinois) * | (3)<br>Percent<br>Change (+or-) ** |
|-----|---|--|------------------------------------|
| 1.  | Automobile Liability Private Passenger      |  |                                    |
|     | Commercial                                  | 2,145,934.12                                 | 1.4%                               |
| 2.  | Automobile Physical Damag Private Passenger | 420,818.39                                   | 0.0%                               |
|     | Commercial                                  |  |                                    |
| 3.  | Liability Other Than Auto                   |  |                                    |
| 4.  | Burglary and Theft                          |  |                                    |
| 5.  | Glass                                       |  |                                    |
| 6.  | Fidelity                                    |  |                                    |
| 7.  | Surety                                      |  |                                    |
| 8.  | Boiler and Machinery                        |  |                                    |
| 9.  | Fire  |  |                                    |
| 10. | Extended Coverage                           |  |                                    |
| 11. | Inland Marine                               |  |                                    |
| 12. | Homeowners                                  |  |                                    |
| 13. | Commercial Multi-Peril                      |  |                                    |
| 14. | Crop Hail                                   |  |                                    |
| 15. | Other                                       |  |                                    |

Line of Insurance

Does filing only apply to certain territory (territories) or certain Classes? If so, specify: No

Brief description of filing. (If filing follows rates of an advisory Organization, specify organization):

The changes are a result of a countrywide program review of the Commercial Transportation Program. The company is targeting an overall rate impact of 1.4% for AL. Territory relativity factors were updated based on more current ISO relativities. Class factors were updated for Garage Dealer and Garage Service Liability.

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new rates.

Argonaut Midwest Insurance Company

Name of Company

Maggie Welk, Sr. Regulatory Filing Specialist

Official - Title

## Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

## SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision  
effective 02/01/2014 new and 04/01/2014 renewal.

|     | (1)                          | (2)                                   | (3)                         |
|-----|------------------------------|---------------------------------------|-----------------------------|
|     | Coverage                     | Annual Premium<br>Volume (Illinois) * | Percent<br>Change (+or-) ** |
| 1.  | Automobile Liability Private |                                       |                             |
|     | Passenger                    | 0                                     | 0.0                         |
|     | Commercial                   | 195,993                               | -11.1                       |
| 2   | Automobile Physical Damag    |                                       |                             |
|     | Private Passenger            | 0                                     | 0.0                         |
|     | Commercial                   | 32,505                                | -2.4                        |
| 3.  | Liability Other Than Auto    |                                       |                             |
| 4.  | Burglary and Theft           |                                       |                             |
| 5.  | Glass                        |                                       |                             |
| 6.  | Fidelity                     |                                       |                             |
| 7.  | Surety                       |                                       |                             |
| 8.  | Boiler and Machinery         |                                       |                             |
| 9.  | Fire                         |                                       |                             |
| 10. | Extended Coverage            |                                       |                             |
| 11. | Inland Marine                |                                       |                             |
| 12. | Homeowners                   |                                       |                             |
| 13. | Commercial Multi-Peril       |                                       |                             |
| 14. | Crop Hail                    |                                       |                             |
| 15. | Other                        |                                       |                             |
|     | Life of Insurance            |                                       |                             |

Does filing only apply to certain territory (territories) or certain  
Classes? If so,  
specify: NO

Brief description of filing. (If filing follows rates of an advisory  
Organization, specify  
organization):

Adopting ISO reference filings numbers CA-2013-RZRLC, CA-2012-RZR1

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new  
rates.

Capitol Indemnity Corporation

Name of Company

Amanda Mullen, Senior Product Analyst

Official – Title

**Section 754.EXHIBIT A Summary Sheet (Form RF-3)**

FORM (RF-3)

**SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision  
effective 05/01/2014 New and Renewal.

|     | (1)  | (2)                                   | (3)                         |
|-----|--|---------------------------------------|-----------------------------|
|     | Coverage                                       | Annual Premium<br>Volume (Illinois) * | Percent<br>Change (+or-) ** |
| 1.  | Automobile Liability Private<br>Passenger      |                                       |                             |
|     | Commercial                                     | 1,081,879                             | -6.25%                      |
| 2.  | Automobile Physical Damag<br>Private Passenger |                                       |                             |
|     | Commercial                                     | 352,339                               | -11.57%                     |
| 3.  | Liability Other Than Auto                      |                                       |                             |
| 4.  | Burglary and Theft                             |                                       |                             |
| 5.  | Glass  |                                       |                             |
| 6.  | Fidelity                                       |                                       |                             |
| 7.  | Surety   |                                       |                             |
| 8.  | Boiler and Machinery                           |                                       |                             |
| 9.  | Fire   |                                       |                             |
| 10. | Extended Coverage                              |                                       |                             |
| 11. | Inland Marine                                  |                                       |                             |
| 12. | Homeowners                                     |                                       |                             |
| 13. | Commercial Multi-Peril                         |                                       |                             |
| 14. | Crop Hail                                      |                                       |                             |
| 15. | Other  |                                       |                             |
|     | Life of Insurance                              |                                       |                             |

Does filing only apply to certain territory (territories) or certain  
Classes? If so,  
specify: No

Brief description of filing. (If filing follows rates of an advisory  
Organization, specify  
organization):

Adopting Loss Cost: CA-2011-OLC1, CA-2012-RUMLC,  
CA-2013-BRLA1, CA-2012-RADLC, CA-2012-RZRLC

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new  
rates.

Church Mutual Insurance Company

Name of Company

Steve Nurre - Product Consultant

Official - Title

# ILLINOIS DEPARTMENT OF INSURANCE

## SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective

4/15/2014 New &amp; Renewal

| (1)<br><u>Coverage</u>  | (2)<br><u>Annual Premium<br/>Volume (Illinois)*</u> | (3)<br><u>Percent<br/>Change (+ or -)**</u> |
|---|---|---|
| 1. Automobile Liability Private<br>Passenger Commercial       | 631,822   | 2.6%  |
| 2. Automobile Physical Damage<br>Private Passenger Commercial | 229,755   | 11.8%                                       |
| 3. Liability Other Than Auto                                  |   |   |
| 4. Burglary and Theft   |   |   |
| 5. Glass  |   |   |
| 6. Fidelity   |   |   |
| 7. Surety   |   |   |
| 8. Boiler and Machinery                                       |   |   |
| 9. Fire   |   |   |
| 10. Extended Coverage   |   |   |
| 11. Inland Marine   |   |   |
| 12. Homeowners  |   |   |
| 13. Commercial Multi-Peril                                    |   |   |
| 14. Crop Hail   |   |   |
| 15. Other   |   |   |
| Line of Insurance   |   |   |

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

All Territories

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Revising LCMs

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new rates.

Citizens Insurance Company of America

Name of Company

Laura Lussier - Actuarial Asst.

Official - Title

# ILLINOIS DEPARTMENT OF INSURANCE

## SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 4/15/2014 New & Renewal

| (1)<br><u>Coverage</u>  | (2)<br><u>Annual Premium<br/>Volume (Illinois)*</u> | (3)<br><u>Percent<br/>Change (+ or -)**</u> |
|---|---|---|
| 1. Automobile Liability Private<br>Passenger Commercial       | 155,449   | 2.8%  |
| 2. Automobile Physical Damage<br>Private Passenger Commercial | 40,303  | 12.4%                                       |
| 3. Liability Other Than Auto                                  |   |   |
| 4. Burglary and Theft   |   |   |
| 5. Glass  |   |   |
| 6. Fidelity   |   |   |
| 7. Surety   |   |   |
| 8. Boiler and Machinery                                       |   |   |
| 9. Fire   |   |   |
| 10. Extended Coverage   |   |   |
| 11. Inland Marine   |   |   |
| 12. Homeowners  |   |   |
| 13. Commercial Multi-Peril                                    |   |   |
| 14. Crop Hail   |   |   |
| 15. Other _____   |   |   |
| Line of Insurance   |   |   |

Does filing only apply to certain territory (territories) or certain classes? If so, specify: All Territories

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Revising LCMs

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new rates.

Citizens Insurance Company of Illinois

Name of Company

Laura Lussier - Actuarial Asst.

Official - Title

# ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective

05/01/14

| (1)                           | (2)  | (3)                                  |
|-------------------------------|--|--------------------------------------|
| <u>Coverage</u>               | <u>Annual Premium<br/>Volume (Illinois)*</u> | <u>Percent<br/>Change (+ or -)**</u> |
| 1. Automobile Liability       |  |                                      |
| Private Passenger             |  |                                      |
| Commercial                    | <u>\$7,342,538</u>                           | <u>2.7%</u>                          |
| 2. Automobile Physical Damage |  |                                      |
| Private Passenger             |  |                                      |
| Commercial                    | <u>\$3,044,193</u>                           | <u>4.2%</u>                          |
| 3. Liability Other Than Auto  |  |                                      |
| 4. Burglary and Theft         |  |                                      |
| 5. Glass                      |  |                                      |
| 6. Fidelity                   |  |                                      |
| 7. Surety                     |  |                                      |
| 8. Boiler and Machinery       |  |                                      |
| 9. Fire                       |  |                                      |
| 10. Extended Coverage         |  |                                      |
| 11. Inland Marine             |  |                                      |
| 12. Homeowners                |  |                                      |
| 13. Commercial Multi-Peril    |  |                                      |
| 14. Crop Hail                 |  |                                      |
| 15. Other _____               |  |                                      |
| Line of Insurance             |  |                                      |

Does filing only apply to certain territory (territories) or certain classes? If so, specify: No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): \_\_\_\_\_

Revised base rates and class factors for Truck, Tractor, Trailer and revised liability deductible factors. New limits  
were added to comply with the increase in Financial Responsibility limits from 20/40/15 to 25/50/20 effective 1/1/15.

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new rates.

Erie Insurance Exchange

Name of Company



Ross C. Fonticella, ACAS, MAAA  
 Vice President and Manager

Official - Title



**Section 754.EXHIBIT A Summary Sheet (Form RF-3)**

FORM (RF-3)

**SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision  
effective 04/01/2014.

|     | (1)<br>Coverage                              | (2)<br>Annual Premium<br>Volume (Illinois) * | (3)<br>Percent<br>Change (+or-) ** |
|-----|--|--|------------------------------------|
| 1.  | Automobile Liability Private Passenger       |  |                                    |
|     | Commercial                                   | \$230,000                                    | -9.0%                              |
| 2.  | Automobile Physical Damage Private Passenger |  |                                    |
|     | Commercial                                   | \$68,000                                     | -9.0%                              |
| 3.  | Liability Other Than Auto                    |  |                                    |
| 4.  | Burglary and Theft                           |  |                                    |
| 5.  | Glass  |  |                                    |
| 6.  | Fidelity                                     |  |                                    |
| 7.  | Surety                                       |  |                                    |
| 8.  | Boiler and Machinery                         |  |                                    |
| 9.  | Fire   |  |                                    |
| 10. | Extended Coverage                            |  |                                    |
| 11. | Inland Marine                                |  |                                    |
| 12. | Homeowners                                   |  |                                    |
| 13. | Commercial Multi-Peril                       |  |                                    |
| 14. | Crop Hail                                    |  |                                    |
| 15. | Other  |  |                                    |
|     | Life of Insurance                            |  |                                    |

Does filing only apply to certain territory (territories) or certain  
Classes? If so,  
specify: \_\_\_\_\_

Brief description of filing. (If filing follows rates of an advisory  
Organization, specify  
organization): Adoption of ISO's Zone Rated loss costs (CA-2012-RZRLC) effective April 1,  
2014. Our LCM remains unchanged (Liability - 1.45 & Physical Damage 1.50).

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new rates.

Everest National Insurance Company

Name of Company

Shiranie Fernandez, Associate Manager

Official – Title

## ILLINOIS

## SUMMARY SHEET (Form RF- 3)

Change in Company's premium or rate level produced by rate revision effective 01/01/2014

| (1)<br>Coverage               | (2)<br>Annual Premium<br>Volume (Illinois)* | (3)<br>Percent<br>Change (+ or -)** |
|-------------------------------|---|-------------------------------------|
| 1. Automobile Liability       |   |                                     |
| Private Passenger             |   |                                     |
| Commercial                    | <u>\$10,538,979</u>                         | <u>-0.1%</u>                        |
| 2. Automobile Physical Damage |   |                                     |
| Private Passenger             |   |                                     |
| Commercial                    | <u>\$414,650</u>                            | <u>-1.8%</u>                        |
| 3. Liability Other Than Auto  |   |                                     |
| 4. Burglary and Theft         |   |                                     |
| 5. Glass                      |   |                                     |
| 6. Fidelity                   |   |                                     |
| 7. Surety                     |   |                                     |
| 8. Boiler and Machinery       |   |                                     |
| 9. Fire                       |   |                                     |
| 10. Extended Coverage         |   |                                     |
| 11. Inland Marine             |   |                                     |
| 12. Homeowners                |   |                                     |
| 13. Commercial Multi-Peril    |   |                                     |
| 14. Crop Hail                 |   |                                     |
| 15. Other                     |   |                                     |
| Line of Insurance             |   |                                     |

Does filing only apply to certain territory (territories) or certain classes? If so, specify:  
No, it applies equally to all territories and classes in the Taxi & Limousine Specialty Program

Brief Description of filing ( If filing follows rates of an advisory organization, specify organization):  
Added Physical Damage application of the Owner/Operator Discount at level of 2%  
Increased Paid in Full Discount. Decreased surcharge for operators age 21-22 or  
over age 70.

\* Adjusted to reflect all prior rate changes.

\*\* Change in Company's premium level which will result from the application of new rates.

FIRST CHICAGO INSURANCE COMPANY

Name of Company

Jennifer Faley - Senior Pricing and Reserving Analyst

Official - Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate  
revision effective 7-1-2014 .

| (1)<br><u>Coverage</u>        | (2)<br><u>Annual Premium<br/>Volume (Illinois)*</u> | (3)<br><u>Percent<br/>Change (+ or -)**</u> |
|-------------------------------|---|---|
| 1. Automobile Liability       |   |   |
| Private Passenger             |   |   |
| Commercial                    | 3064155   | +2.7%                                       |
| 2. Automobile Physical Damage |   |   |
| Private Passenger             |   |   |
| Commercial                    | 1250420   | +7.8%                                       |
| 3. Liability Other Than Auto  |   |   |
| 4. Burglary and Theft         |   |   |
| 5. Glass                      |   |   |
| 6. Fidelity                   |   |   |
| 7. Surety                     |   |   |
| 8. Boiler and Machinery       |   |   |
| 9. Fire                       |   |   |
| 10. Extended Coverage         |   |   |
| 11. Inland Marine             |   |   |
| 12. Homeowners                |   |   |
| 13. Commercial Multi-Peril    |   |   |
| 14. Crop Hail                 |   |   |
| 15. Other                     |   |   |
| Line of Insurance             |   |   |

Does filing only apply to certain territory (territories) or certain classes?  
If so, specify: No.

Brief description of filing. (If filing follows rates of an advisory  
organization, specify organization): Adoption of current ISO loss costs with  
revised company loss cost multipliers.

\* Adjusted to reflect all prior rate changes.

\*\* Change in Company's premium level which will  
result from application of new rates.

Grinnell Mutual Reinsurance Company  
Name of Company

John Landkamer - Actuary  
Official - Title

# ILLINOIS DEPARTMENT OF INSURANCE

## SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 4/15/2014 New & Renewal

| (1)<br><u>Coverage</u>  | (2)<br><u>Annual Premium<br/>Volume (Illinois)*</u> | (3)<br><u>Percent<br/>Change (+ or -)**</u> |
|---|---|---|
| 1. Automobile Liability Private<br>Passenger Commercial       | 484,561   | 1.9%  |
| 2. Automobile Physical Damage<br>Private Passenger Commercial | 173,635   | 8.1%  |
| 3. Liability Other Than Auto                                  |   |   |
| 4. Burglary and Theft   |   |   |
| 5. Glass  |   |   |
| 6. Fidelity   |   |   |
| 7. Surety   |   |   |
| 8. Boiler and Machinery                                       |   |   |
| 9. Fire   |   |   |
| 10. Extended Coverage   |   |   |
| 11. Inland Marine   |   |   |
| 12. Homeowners  |   |   |
| 13. Commercial Multi-Peril                                    |   |   |
| 14. Crop Hail   |   |   |
| 15. Other   |   |   |
| Line of Insurance   |   |   |

Does filing only apply to certain territory (territories) or certain classes? If so, specify: All Territories

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Revising LCMs

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new rates.

Hanover Insurance Company

Name of Company

Laura Lussier - Actuarial Asst.

Official - Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate  
revision effective January 1, 2014

| (1)                           | (2)  | (3)                                   |
|-------------------------------|--|---------------------------------------|
| <u>Coverage</u>               | <u>Annual Premium<br/>Volume (Illinois)*</u> | <u>Percent<br/>Change ( + or -)**</u> |
|                               | <b>\$87,684</b>                              | <b>-11.1%</b>                         |
| 1. Automobile Liability       |  |                                       |
| Private Passenger             |  |                                       |
| Commercial                    |  |                                       |
| 2. Automobile Physical Damage | <b>\$15,481</b>                              | <b>-2.7%</b>                          |
| Private Passenger             |  |                                       |
| Commercial                    |  |                                       |
| 3. Liability Other Than Auto  |  |                                       |
| 4. Burglary and Theft         |  |                                       |
| 5. Glass                      |  |                                       |
| 6. Fidelity                   |  |                                       |
| 7. Surety                     |  |                                       |
| 8. Boiler and Machinery       |  |                                       |
| 9. Fire                       |  |                                       |
| 10. Extended Coverage         |  |                                       |
| 11. Inland Marine             |  |                                       |
| 12. Homeowners                |  |                                       |
| 13. Commercial Multi-Peril    |  |                                       |
| 14. Crop Hail                 |  |                                       |
| 15. Other                     |  |                                       |
| <u>Line of Insurance</u>      |  |                                       |

Does Filing only apply to certain territory (territories) or certain  
classes? If so, specify:

**This filing applies to the HDI-Gerling Energi Program only**

Brief description of filing. (If filing follows rates of an advisory  
organization, specify organization):

**Illinois Revised Loss Costs for Zone-Rated Coverages**  
**(CA-2012-RZRLC)**

\* Adjusted to reflect all prior rate changes.

\*\* Change in Company's premium level which will  
result from application of new rates.

**HDI-Gerling America Insurance Company**

Name of Company

**Kevin Purcell - VP IRC, LLC**

Official - Title

# ILLINOIS DEPARTMENT OF INSURANCE

## SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 4/15/2014 New & Renewal

| (1)<br><u>Coverage</u>  | (2)<br><u>Annual Premium<br/>Volume (Illinois)*</u> | (3)<br><u>Percent<br/>Change (+ or -)**</u> |
|---|---|---|
| 1. Automobile Liability Private<br>Passenger Commercial       | 777,921   | 1.8%  |
| 2. Automobile Physical Damage<br>Private Passenger Commercial | 228,620   | 9.1%  |
| 3. Liability Other Than Auto                                  |   |   |
| 4. Burglary and Theft   |   |   |
| 5. Glass  |   |   |
| 6. Fidelity   |   |   |
| 7. Surety   |   |   |
| 8. Boiler and Machinery                                       |   |   |
| 9. Fire   |   |   |
| 10. Extended Coverage   |   |   |
| 11. Inland Marine   |   |   |
| 12. Homeowners  |   |   |
| 13. Commercial Multi-Peril                                    |   |   |
| 14. Crop Hail   |   |   |
| 15. Other   |   |   |
| Line of Insurance   |   |   |

Does filing only apply to certain territory (territories) or certain classes? If so, specify: All Territories

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Revising LCMs

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new rates.

Massachusetts Bay Insurance Company

Name of Company

Laura Lussier - Actuarial Asst.

Official - Title

**Section 754.EXHIBIT A Summary Sheet (Form RF-3)**

FORM (RF-3)

## SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision  
effective 01/01/2014.

|     | (1)<br>Coverage                             | (2)<br>Annual Premium<br>Volume (Illinois) * | (3)<br>Percent<br>Change (+or-) ** |
|-----|---|--|------------------------------------|
| 1.  | Automobile Liability Private Passenger      |  |                                    |
|     | Commercial                                  | 26,612                                       | -11.1%                             |
| 2.  | Automobile Physical Damag Private Passenger |  |                                    |
|     | Commercial                                  | 8,954  | -2.7%                              |
| 3.  | Liability Other Than Auto                   |  |                                    |
| 4.  | Burglary and Theft                          |  |                                    |
| 5.  | Glass                                       |  |                                    |
| 6.  | Fidelity                                    |  |                                    |
| 7.  | Surety                                      |  |                                    |
| 8.  | Boiler and Machinery                        |  |                                    |
| 9.  | Fire  |  |                                    |
| 10. | Extended Coverage                           |  |                                    |
| 11. | Inland Marine                               |  |                                    |
| 12. | Homeowners                                  |  |                                    |
| 13. | Commercial Multi-Peril                      |  |                                    |
| 14. | Crop Hail                                   |  |                                    |
| 15. | Other                                       |  |                                    |
|     | Life of Insurance                           |  |                                    |

Does filing only apply to certain territory (territories) or certain Classes? If so, specify: NO

Brief description of filing. (If filing follows rates of an advisory Organization, specify organization): Adoption of ISO loss costs contained in CA-2012-RZRLC.

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new rates.

National American Insurance Company

Name of Company

Jennifer Carr, Senior Regulatory Analyst

Official - Title

**Section 754.EXHIBIT A Summary Sheet (Form RF-3)****FORM (RF-3)****SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision  
effective 2/1/2014.

|     | (1)  | (2)                                   | (3)                         |
|-----|--|---------------------------------------|-----------------------------|
|     | Coverage                                       | Annual Premium<br>Volume (Illinois) * | Percent<br>Change (+or-) ** |
| 1.  | Automobile Liability Private<br>Passenger      |                                       |                             |
|     | Commercial                                     | 821,230                               | 10.4%                       |
| 2.  | Automobile Physical Damag<br>Private Passenger |                                       |                             |
|     | Commercial                                     | 324,971                               | 17.8%                       |
| 3.  | Liability Other Than Auto                      |                                       |                             |
| 4.  | Burglary and Theft                             |                                       |                             |
| 5.  | Glass  |                                       |                             |
| 6.  | Fidelity                                       |                                       |                             |
| 7.  | Surety   |                                       |                             |
| 8.  | Boiler and Machinery                           |                                       |                             |
| 9.  | Fire   |                                       |                             |
| 10. | Extended Coverage                              |                                       |                             |
| 11. | Inland Marine                                  |                                       |                             |
| 12. | Homeowners                                     |                                       |                             |
| 13. | Commercial Multi-Peril                         |                                       |                             |
| 14. | Crop Hail                                      |                                       |                             |
| 15. | Other  |                                       |                             |

**Line of Insurance**

Does filing only apply to certain territory (territories) or certain  
Classes? If so,  
specify: No

Brief description of filing. (If filing follows rates of an advisory  
Organization, specify  
organization): Implementation of Scorecard.

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new  
rates.

Sentry Insurance A Mutual Company

Name of Company

*Mick Williams*

Digitally signed by Luke Arneson  
DN: cn=Luke Arneson, o=, ou, email=luke.arneson@sentry.com, c=US  
Date: 2013.06.24 15:11:55 -0500

Official – Title



**Section 754.EXHIBIT A Summary Sheet (Form RF-3)**

FORM (RF-3)

**SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision  
effective 04/16/2014.

|     | (1)  | (2)                                   | (3)                         |
|-----|--|---------------------------------------|-----------------------------|
|     | Coverage                                       | Annual Premium<br>Volume (Illinois) * | Percent<br>Change (+or-) ** |
| 1.  | Automobile Liability Private<br>Passenger      |                                       |                             |
|     | Commercial                                     | \$256,293                             | +4.2%                       |
| 2   | Automobile Physical Damag<br>Private Passenger |                                       |                             |
|     | Commercial                                     | \$75,213                              | +2.7%                       |
| 3.  | Liability Other Than Auto                      |                                       |                             |
| 4.  | Burglary and Theft                             |                                       |                             |
| 5.  | Glass  |                                       |                             |
| 6.  | Fidelity                                       |                                       |                             |
| 7.  | Surety   |                                       |                             |
| 8.  | Boiler and Machinery                           |                                       |                             |
| 9.  | Fire   |                                       |                             |
| 10. | Extended Coverage                              |                                       |                             |
| 11. | Inland Marine                                  |                                       |                             |
| 12. | Homeowners                                     |                                       |                             |
| 13. | Commercial Multi-Peril                         |                                       |                             |
| 14. | Crop Hail                                      |                                       |                             |
| 15. | Other  |                                       |                             |
|     | Life of Insurance                              |                                       |                             |

Does filing only apply to certain territory (territories) or certain  
Classes? If so,  
specify: No.

Brief description of filing. (If filing follows rates of an advisory  
Organization, specify  
organization):

Revised Loss Costs, Loss Cost Multipliers, Rates and Rules.

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new  
rates.

State Automobile Mutual Insurance Company

Name of Company

Cheryl Klepper - State Regulatory Analyst I

Official - Title

**Section 754.EXHIBIT A Summary Sheet (Form RF-3)**

FORM (RF-3)

## SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision  
effective 04/16/2014.

|     | (1)  | (2)                                   | (3)                         |
|-----|--|---------------------------------------|-----------------------------|
|     | Coverage                                       | Annual Premium<br>Volume (Illinois) * | Percent<br>Change (+or-) ** |
| 1.  | Automobile Liability Private<br>Passenger      |                                       |                             |
|     | Commercial                                     | \$1,887,531                           | +2.2%                       |
| 2.  | Automobile Physical Damag<br>Private Passenger |                                       |                             |
|     | Commercial                                     | \$640,983                             | +5.2%                       |
| 3.  | Liability Other Than Auto                      |                                       |                             |
| 4.  | Burglary and Theft                             |                                       |                             |
| 5.  | Glass  |                                       |                             |
| 6.  | Fidelity                                       |                                       |                             |
| 7.  | Surety   |                                       |                             |
| 8.  | Boiler and Machinery                           |                                       |                             |
| 9.  | Fire   |                                       |                             |
| 10. | Extended Coverage                              |                                       |                             |
| 11. | Inland Marine                                  |                                       |                             |
| 12. | Homeowners                                     |                                       |                             |
| 13. | Commercial Multi-Peril                         |                                       |                             |
| 14. | Crop Hail                                      |                                       |                             |
| 15. | Other  |                                       |                             |
|     | Life of Insurance                              |                                       |                             |

Does filing only apply to certain territory (territories) or certain  
Classes? If so,  
specify: No.

Brief description of filing. (If filing follows rates of an advisory  
Organization, specify  
organization):

Revised Loss Costs, Loss Costs Multipliers, Rates and Rules.

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new  
rates.

State Auto Property & Casualty Insurance Company

Name of Company

Cheryl Klepper - State Regulatory Analyst I

Official - Title